AOC-238.1	Doc.	Code	DSPV
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Commonwealth of Kentucky
Court of Justice www.courts.ky.gov



## SIMPLIFIED PRELIMINARY FINAL VERIFIED DISCLOSURE STATEMENT\*

Case No.	
Court	
County	
Division	

Court of Justice www.courts.ky.gov FCRPP 2 and FCRPP 3	☐ PRELIMINARY ☐ FINAL VERIFIED DISCLOSURE STATEMENT*	Division			
	D INCOME LESS THAN \$100,000 AND COMBINE	D ASSETS LESS THAN \$100,000			
IN RE THE MARRIAGE OF:					
	PI	ETITIONER			
and					
	RI	ESPONDENT			
-	under oath the following Verified Disclosure ampt disclosure of the following information:	Statement pursuant to FCRPP 2 <b>OR</b>			
NOTE: A response of "see attach requested herein only.	ed" is not appropriate for any portion of	this statement. Attach documents			
I. IDENTIFYING INFORMATION OF	BOTH PARTIES				
Petitioner	Respondent				
Name:	Name:				
Street Address:	Street Address:				
City, State, Zip:	City, State, Zip:				
Age: Phone #:	Age: Phone	e #:			
II. INCOME AND EMPLOYMENT INFORMATION OF BOTH PARTIES (If self-employed name of company and adjusted gross monthly income)					
Petitioner	Respondent				
Employer Name:	Employer Name:				
Gross monthly income: \$	Gross monthly inc	ome: \$			
Other income: \$	Other income: \$ _				
III. MARRIAGE INFORMATION					
Date of Marriage:	Date of separation	:			
Place of Marriage (city, county & state	e):				

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<ul><li>IV. CHILDREN'S INFORMATION (If more than 3 children,</li><li>A. Minor children born to parties (number)</li></ul>		•	orate sheet)  DREN attached?
· · · · · · · · · · · · · · · · · · ·		TOTE CITIEL	
Name			Current Age
B. Monthly child care/day care expenses: Cost \$      C. Monthly medical, dental and vision insurance for childre     D. Either party court-ordered to pay child support for a child     Paying party	n: Cost \$ born bef	ore the chi	ldren born of this marriage? ☐ Yes ☐ No
Children: (List names and ages)			
V. SUMMARY OF ASSETS & DEBTS			<del>-</del>
Do you own any real estate?	Yes	No	If yes, put information below.
Do you own any vehicles?			If yes, put information below.
Do you have any bank accounts or savings?			If yes, put information below.
Do you have assets in a safety deposit box?	Yes	No	If yes, put information below.
Do you have any stocks, bonds, etc.?	Yes	No	If yes, put information below.
Do you have any retirement account, IRA, 401k?	Yes	No	If yes, put information below.
Do you have any cash value in life insurance?	Yes	No	If yes, put information below.
Do you own any interest in a business?	Yes	No	If yes, put information below.
Are there any other assets?	Yes	No	If yes, put information below.
Are there assets held for another person, including children	Yes	No	If yes, put information below.
Have you and your spouse already divided your household	goods ar	nd persona	Il property? Yes No
Item 1:			
Item Description:			
Who Holds Possession?	_ Valua	ation Date:	Not Velice on Emiliar
Fair Market Value: Amount Owed: Is this a leased vehicle/asset? □ Yes □ No If yes, please of			
Lease Term Ends:			
Item 2:			
Item Description:			
Who Holds Possession?			
Fair Market Value: Amount Owed: Is this a leased vehicle/asset? □ Yes □ No If yes, please of			
Lease Term Ends:	Joinproto	tiro ronovir	ng. Menany i aymena
Item 3:			
Item Description:			
Who Holds Possession?	_ Valua	ation Date:	Not Volue or Equity:
Fair Market Value: Amount Owed: Is this a leased vehicle/asset? □ Yes □ No If yes, please of			
Lease Term Ends:	-		• • • • • • • • • • • • • • • • • • • •

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Item 4:		
Item Description:		
Who Holds Possession?	Valuatio	n Date:
		Net Value or Equity:
Is this a leased vehicle/asset?  Lease Term Ends:		e following: Monthly Payment:
Item 5:		
Item Description:		
		n Date:
		Net Value or Equity:
Lease Term Ends:		e following: Monthly Payment:
More OTHER ASSETS attached	I? □ Yes □ No	Total Values:
Do you owe any debts?   Ye	s • No If yes, put information	below.
Creditor 1:		
Creditor:		
		Premarital Account?
		 Total Balance:
Creditor 2:		
		Premarital Account?
		Total Balance:
Creditor 3:		
		Premarital Account?
,		
Valuation Date:	Monthly Payment:	
Valuation Date:	Monthly Payment:	Total Balance.
	Monthly Payment:	rotal balance.
Creditor 4:		
Creditor 4: Creditor:		
Creditor 4: Creditor: Party Named on Debt:		
Creditor 4: Creditor: Party Named on Debt: Valuation Date:		Premarital Account?
Creditor 4: Creditor: Party Named on Debt: Valuation Date: Creditor 5:	Monthly Payment:	Premarital Account? Total Balance:
Party Named on Debt: Valuation Date: Creditor 5: Creditor:	Monthly Payment:	Premarital Account?

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Are you claiming a right to maintenance?   Yes	No if yes, complete this expense list:
A. COMMON EXPENSES FOR FAMILY (Party and any children of the marriage)	B. YOUR PERSONAL EXPENSES  (not including any children's expenses)
FOOD/GROCERIES FOR FAMILY (Non-entertainment)	Church and charitable donations
, ,	Clothing
HOUSING	Cosmetics, hygiene & toiletries
Cable	Disability insurance
Garbage collection	Dry cleaning & laundry
Electric, gas, propane & oil utilities	Entertainment, including restaurants & movies
Home maintenance & repairs	Hair care (barber, salon, etc.)
Homeowner's insurance	Internet access
Household supplies	Life insurance (whole life or term)
Maid service	Manicures & pedicures
Property taxes	Newspapers, magazines & books
Rent or 1st mortgage	Professional dues or uniforms
2nd mortgage/home equity loan	Sports, exercise, hobbies, crafts, etc.
Telephone	Travel (monthly average)
Mobile phone	MEDICAL
Vet/pet supplies	Dental (including orthodontics)
Yard expense/maintenance	Eyeglasses, contacts & hearing aids, exams and testing
Water/sewage	
TRANSPORTATION	Insurance (hospitalization)
Gas and oil	Medical doctor(s)
Liability insurance	Prescription medication
License/taxes/tag	OTHER PERSONAL EXPENSES (list):
Payment/loan	
Repairs/maintenance	
Other – bus, taxi, tolls & parking	Sub-total from attached other personal expenses, if needed  Attached
OTHER FAMILY EXPENSES (list):	expenses, in needed
	SUBTOTAL FROM COLUMN B
	SUBTOTAL FROM COLUMN A
Sub-total from attached other family expenses, if needed  Attached	SUBTOTAL FROM CHILDREN'S EXPENSE LIST ATTACHMENT
SUBTOTAL (Column A)	GRAND TOTAL OF COLUMN A, B, AND ATTACHMENTS

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contained he	erein, including the information edge, information and belief. se instructions to the best of m	provided on any so Further, I acknowle	declare under chedules and atta	achments	s, is true an	
			□ Petitioner	□ Re	espondent	{check one}
	=	) SS				
Subs	cribed and sworn before me by	у		_, this	day of	,
 My co	ommission expires:					
served by $\Box$	REBY CERTIFY that a copy of mail, postage prepaid, or lead he copy of the copy	and-delivery, or 🗅 el	losure Stateme	in accord	dance with	Kentucky Rule of Civil
at (address) this the	day of	······································	·			
			Signature		<del> </del>	
			☐ Attorney for	Petition	er 🗅 Attorn	ey for Respondent
□ Petitioner □ Respondent				ondent		
			Address:			
			Phone: ( ) _			
			Fax: ( )			
			Email:			

## \*NOTE

When this form is utilized as an AOC-238.1, Simplified Preliminary Verified Disclosure Statement, unless otherwise ordered by the Court or required by Local Rule, this form is NOT to be filed with the <u>Court</u>. FCRPP 2(3). However, the entire form and all attachments are to be exchanged between the parties within 45 days of service of the petition on the respondent, and objections thereto shall be exchanged within 20 days thereafter.

When this form is utilized as an AOC-239.1, Simplified Final Verified Disclosure Statement, pursuant to FCRPP 3(3), this form is to be filed with the Court no later than 5 days prior to the trial if property matters are in dispute at that trial. However, the parties may file an Affidavit of No Change In Circumstances, AOC- 239.2, if the AOC-238.1, Simplified Preliminary Verified Disclosure Statement was filed with the Court. A copy of the Final Verified Disclosure Statement or the Affidavit, together with any supporting documentation, shall be provided to the opposing party 15 days prior to trial unless otherwise ordered by the Court.